

IN THE UNITED STATES BANKRUPTCY COURT FOR THE MIDDLE DISTRICT OF ALABAMA

In re:

Chapter 11

Case No.:

Debtor

CHAPTER 11 DEBTOR'S MONTHLY FINANCIAL REPORT

FOR THE PERIOD BEGINNING:

AND ENDING:

Affirmations of the responsible party for the debtor in possession:

1. All post-petition taxes (tax obligations arising after the chapter 11 petition was filed) are currently paid or deposited. If no, enter **TYPE** and **AMOUNT UNPAID**:

YES

NO

2. All administrative expenses (post-petition obligations) other than taxes are current. If no, enter **TYPE** and **AMOUNT PAID**:

YES

NO

3. Quarterly fees are current. Enter **Last quarter paid** and **Amount paid**:

YES

NO

4. Estate property, which is subject to loss by theft, fire, or other casualty, is insured to the extent of its fair market value. If no, describe the property which is uninsured or under insured.

YES

NO

5. New books and records are opened and are current and are being maintained on an **accrual** basis.

YES

NO

6. New bank accounts have been opened and **ALL** old accounts have been closed as was required.

YES

NO

7. Pre-petition debts (obligations due on or before the filing of the case) have not been paid since the filing of this chapter 11 proceeding. If no, attach a list of all pre-petition debts which were paid since the filing of the case. The list must reflect the name and address of the creditor paid, the amount paid, and the justification, if any, for the payment. In responding to this affirmation, do not consider payments made to secured creditors and lessors under an adequate protection agreement.

YES

NO

8. The only transfers of property made during this period were transfers which were in the ordinary course of business. If no, attach a statement giving the particulars of all property which was transferred outside the ordinary course of business and state whether prior authority for such transfer(s) was obtained from the court.

YES

NO

9. Estate funds which are on deposit in banking institutions are fully insured by FDIC or the banking institution has acquired a bond in compliance with 11 U.S.C. Section 345. If no, provide the name of the bank(s) wherein monies are deposited and the balance of all accounts therein.

YES

NO

10. No professional fees have been paid except by order of the court. If no, enter name of professional, date and amount paid.

YES

NO

Affirmations

1/17/03 4:11 PM

MONTHLY BANK ACCOUNT RECONCILIATION

Chapter 11

Case No.: _____ 0

Debtor

For the Period Beginning 01/00/00 and Ending 01/00/00

A separate form is required for each bank account, including ALL savings and investment accounts, i.e. certificates of deposits, money market accounts, stocks and bonds, etc.

BANK: _____

Branch: _____

Account Name: Pre-Petition Account - _____

Account #: _____

Beginning Balance	\$0.00
Total Amount of Deposits Made	\$0.00
Total Amount of Checks Written	\$0.00
Other Withdrawals	\$0.00
Service Charges	\$0.00
Closing Balance	\$0.00

Number of FIRST Check Written This Period _____

Number of LAST Check Written This Period _____

Total Number of Checks Written This Period _____

CHECK/DEPOSIT REGISTER

LIST ALL CHECKS ISSUED, DEPOSITS MADE, AND OTHER WITHDRAWALS

ATTACH COPY OF MOST RECENT BANK STATEMENT

For each transaction, list the DATE, CHECK NO., PAYEE, DESCRIPTION and AMOUNT.

MONTHLY BANK ACCOUNT RECONCILIATION

Chapter 11

Case No.: 0

0
Debtor

For the Period Beginning 01/00/00 and Ending 01/00/00

A separate form is required for each bank account, including ALL savings and investment accounts, i.e. certificates of deposits, money market accounts, stocks and bonds, etc.

BANK: _____

Branch: _____

Account Name: DIP General _____

Account #: _____

Beginning Balance	\$0.00
Total Amount of Deposits Made	\$0.00
Total Amount of Checks Written	\$0.00
Other Withdrawals	\$0.00
Service Charges	\$0.00
Closing Balance	<u>\$0.00</u>

Number of FIRST Check Written This Period _____

Number of LAST Check Written This Period _____

Total Number of Checks Written This Period _____

CHECK/DEPOSIT REGISTER

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MONTHLY BANK ACCOUNT RECONCILIATION

Chapter 11

Case No.: 0

0
Debtor

For the Period Beginning 01/00/00 and Ending 01/00/00

A separate form is required for each bank account, including ALL savings and investment accounts, i.e. certificates of deposits, money market accounts, stocks and bonds, etc.

BANK: _____

Branch: _____

Account Name: DIP Payroll _____

Account #: _____

Beginning Balance	\$0.00
Total Amount of Deposits Made	\$0.00
Total Amount of Checks Written	\$0.00
Other Withdrawals	\$0.00
Service Charges	\$0.00
Closing Balance	\$0.00

Number of FIRST Check Written This Period _____

Number of LAST Check Written This Period _____

Total Number of Checks Written This Period _____

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Debtor

For the Period Beginning 01/00/00 and Ending 01/00/00

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BANK: _____

Branch: _____

Account Name: DIP Tax _____

Account #: _____

Beginning Balance	\$0.00
Total Amount of Deposits Made	\$0.00
Total Amount of Checks Written	\$0.00
Other Withdrawals	\$0.00
Service Charges	\$0.00
Closing Balance	\$0.00

Number of FIRST Check Written This Period _____

Number of LAST Check Written This Period _____

Total Number of Checks Written This Period _____

CHECK/DEPOSIT REGISTER

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For each transaction, list the DATE, CHECK NO., PAYEE, DESCRIPTION and AMOUNT.

BALANCE SHEET

For the period ending:

01/00/00

☐ Check here if Balance Sheet is attached.ASSETS

1. Cash

Pre-petition bank accounts	\$0.00	
DIP General/business account	\$0.00	
DIP Payroll account	\$0.00	
DIP Tax account	\$0.00	
Other (including Cash on Hand)	\$0.00	
Sub-total Cash		\$0.00

2. Securities

\$0.00

3. Accounts Receivable

Pre-petition	\$0.00	
Post-petition	\$0.00	
Sub-total Accounts Receivable		\$0.00

4. Office Supplies and Equipment

\$0.00

5. Inventory (Fair Market Value)

\$0.00

6. Other Current Assets

\$0.00

7. Prepaid Insurance

\$0.00

8. Long Term Assets (including real property, heavy equipment, vehicles, etc.)

\$0.00

9. TOTAL ASSETS\$0.00LIABILITIES

(include both pre- and post-petition debts)

1. Accounts Payable

Pre-petition	\$0.00	
Post-petition	\$0.00	
Sub-total Accounts Payable		\$0.00

2. Short Term Notes Payable

Pre-petition	\$0.00	
Post-petition	\$0.00	
Sub-total Short Term Notes Payable		\$0.00

3. Long Term Notes Payable

Pre-petition	\$0.00	
Post-petition	\$0.00	
Sub-total Long Term Notes Payable		\$0.00

4. Taxes Payable

Pre-petition	\$0.00	
Post-petition	\$0.00	
Sub-total Taxes Payable		\$0.00

5. Other Liabilities

\$0.00

6. TOTAL LIABILITIES

\$0.00

EQUITY (Total Assets Less Total Liabilities)

\$0.00**7. TOTAL LIABILITIES & EQUITY**\$0.00

PREPARER'S CERTIFICATE

As the preparer of the foregoing report, I hereby certify under penalty of perjury that the information contained herein is truthful, complete, and accurate to the best of my knowledge and belief.

Dated: _____

Debtor's Name (typed/printed)

Debtor's Signature

Preparer's Signature

Preparer's Name (typed/printed)

Preparer's Address

City State Zip

CERTIFICATE OF SERVICE

The undersigned hereby certifies that a copy of the foregoing report has this date been served on all the parties listed below and the bankruptcy administrator by placing a copy of the same in the United States mail with sufficient postage prepaid.

Done this _____ day of _____, 2002

Signature

Parties Served:

INCOME STATEMENT

For the period ending:

01/00/00

☐ Check here if Income Statement is attached.

1. Total Operating (Business) Revenue	\$0.00	
2. Total Operating (Business) Expenses	\$0.00	
Net Operating Income		<u>\$0.00</u>
3. Total Non-operating Income	\$0.00	
4. Total Non-operating Expenses	\$0.00	
Net Non-operating Income		<u>\$0.00</u>
NET INCOME		<u><u>\$0.00</u></u>

STATEMENT OF PAYMENTS MADE TO SECURED CREDITORS AND LESSORS

1. Payee: _____
Amount paid this period: \$0.00 Check #: _____
Y N Amount included in Expenses (item 2 on Income Statement)
Y N Adequate protection payment
Stated adequate protection payment amount \$0.00
2. Payee: _____
Amount paid this period: \$0.00 Check #: _____
Y N Amount included in Expenses (item 2 on Income Statement)
Y N Adequate protection payment
Stated adequate protection payment amount \$0.00
3. Payee: _____
Amount paid this period: \$0.00 Check #: _____
Y N Amount included in Expenses (item 2 on Income Statement)
Y N Adequate protection payment
Stated adequate protection payment amount \$0.00
4. Payee: _____
Amount paid this period: \$0.00 Check #: _____
Y N Amount included in Expenses (item 2 on Income Statement)
Y N Adequate protection payment
Stated adequate protection payment amount \$0.00
5. Payee: _____
Amount paid this period: \$0.00 Check #: _____
Y N Amount included in Expenses (item 2 on Income Statement)
Y N Adequate protection payment
Stated adequate protection payment amount \$0.00
6. Payee: _____
Amount paid this period: \$0.00 Check #: _____
Y N Amount included in Expenses (item 2 on Income Statement)
Y N Adequate protection payment
Stated adequate protection payment amount \$0.00

Additional payments made to secured creditors and lessors

7.	Payee: _____	
	Amount paid this period: _____	Check #: _____
	<input type="checkbox"/> <input checked="" type="checkbox"/> Amount included in Expenses (item 2 on Income Statement)	
	<input type="checkbox"/> <input checked="" type="checkbox"/> Adequate protection payment	
	Stated adequate protection payment amount _____	\$0.00
8.	Payee: _____	
	Amount paid this period: _____	Check #: _____
	<input type="checkbox"/> <input checked="" type="checkbox"/> Amount included in Expenses (item 2 on Income Statement)	
	<input type="checkbox"/> <input checked="" type="checkbox"/> Adequate protection payment	
	Stated adequate protection payment amount _____	\$0.00
9.	Payee: _____	
	Amount paid this period: _____	Check #: _____
	<input type="checkbox"/> <input checked="" type="checkbox"/> Amount included in Expenses (item 2 on Income Statement)	
	<input type="checkbox"/> <input checked="" type="checkbox"/> Adequate protection payment	
	Stated adequate protection payment amount _____	\$0.00
10.	Payee: _____	
	Amount paid this period: _____	Check #: _____
	<input type="checkbox"/> <input checked="" type="checkbox"/> Amount included in Expenses (item 2 on Income Statement)	
	<input type="checkbox"/> <input checked="" type="checkbox"/> Adequate protection payment	
	Stated adequate protection payment amount _____	\$0.00
11.	Payee: _____	
	Amount paid this period: _____	Check #: _____
	<input type="checkbox"/> <input checked="" type="checkbox"/> Amount included in Expenses (item 2 on Income Statement)	
	<input type="checkbox"/> <input checked="" type="checkbox"/> Adequate protection payment	
	Stated adequate protection payment amount _____	\$0.00
12.	Payee: _____	
	Amount paid this period: _____	Check #: _____
	<input type="checkbox"/> <input checked="" type="checkbox"/> Amount included in Expenses (item 2 on Income Statement)	
	<input type="checkbox"/> <input checked="" type="checkbox"/> Adequate protection payment	
	Stated adequate protection payment amount _____	\$0.00
13.	Payee: _____	
	Amount paid this period: _____	Check #: _____
	<input type="checkbox"/> <input checked="" type="checkbox"/> Amount included in Expenses (item 2 on Income Statement)	
	<input type="checkbox"/> <input checked="" type="checkbox"/> Adequate protection payment	
	Stated adequate protection payment amount _____	\$0.00
14.	Payee: _____	
	Amount paid this period: _____	Check #: _____
	<input type="checkbox"/> <input checked="" type="checkbox"/> Amount included in Expenses (item 2 on Income Statement)	
	<input type="checkbox"/> <input checked="" type="checkbox"/> Adequate protection payment	
	Stated adequate protection payment amount _____	\$0.00
15.	Payee: _____	
	Amount paid this period: _____	Check #: _____
	<input type="checkbox"/> <input checked="" type="checkbox"/> Amount included in Expenses (item 2 on Income Statement)	
	<input type="checkbox"/> <input checked="" type="checkbox"/> Adequate protection payment	
	Stated adequate protection payment amount _____	\$0.00

TOTAL PAYMENTS MADE TO SECURED CREDITORS AND LESSORS	\$0.00
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AGING OF PAYABLES AND RECEIVABLES

Include Post-Petition Payables of ANY type (A/P, Notes, Taxes, etc.)

Include both pre and post-petition receivables

Do not consider pre-petition payables

☐ Check here if Aging Schedule is attached.

	Payables (Post-Petition)	Receivables (Pre & Post- petition)
Current to 30 days	\$0.00	\$0.00
31 to 60 days	\$0.00	\$0.00
61 to 90 days	\$0.00	\$0.00
91 to 120 days	\$0.00	\$0.00
121 days and older	\$0.00	\$0.00
Total	\$0.00	\$0.00

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